POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

| I hereby revoke all pr 37 CFR 3.73(b). | revious powers of attorney of | given in t | ne app | lication identified in the a | ittached state | ment under | |
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| I hereby appoint: | | | | | 7 | | |
| ✓ Practitioners associ | lated with the Customer Number: | 75671 | | | | | |
| OR | | | | | | | |
| Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): | | | | | | | |
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| | | | → I | | | | |
| as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3750b. | | | | | | | |
| Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: | | | | | | | |
| ridade citalige the corresp | portocino acorcas tos tras appriori | ZOI, IGGIIGA | 20 07 010 | | | | |
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| Country | | | | | | | |
| Telephone | | | | Email | | | |
| Talophono | | | | | | | |
| Assignee Name and Address: Fasm Network Services, LLC | | | | | | | |
| 1209 Orange Street | | | | | | | |
| Wilmington, Delaware 19801 | | | | | | | |
| United States of America | | | | | | | |
| filed in each application the practitioners appo | ogether with a statement und on in which this form is used binted in this form if the app application in which this Po | d. The st ointed pr | atemen actition | t under 37 CFR 3.73(b) m er is authorized to act on | ay be complet | ted by one of | |
| SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee | | | | | | | |

Tribute Control (1) and (1) an FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Telephone

Ellackeusmi

Authorized Person for Fasm Network Services, LLC

Sheryl Parkinson

Signature

Name